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SERIAL NUMBER 10/726,329	FILING OR 371(c) DATE 12/01/2003 RULE	CLASS 606	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 6683.75USU1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/455,062 03/13/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

03/02/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature		Initials	STATE OR COUNTRY MN	SHEETS DRAWING 11
FILING FEE RECEIVED 946				TOTAL CLAIMS 25	INDEPENDENT CLAIMS 4

**ADDRESS**

43541

**TITLE**

Spinal access instrument

FILING FEE RECEIVED 946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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